

<b>ORDER FOR SUPPLIES OR SERVICES</b>										PAGE 1 OF 3	
<b>1. CONTRACT PURCH ORDER/AGREEMENT NO.</b> W56HZV-04-D-0084			<b>2. DELIVERY ORDER/CALL NO.</b> 0001		<b>3. DATE OF ORDER/CALL (YYYYMMDD)</b> 2004FEB11		<b>4. REQUISITION/PURCH REQUEST NO.</b> SEE SCHEDULE		<b>5. PRIORITY</b> DOA4		
<b>6. ISSUED BY</b> TACOM WARREN BLDG 231 AMSTA-AQ-ATAD JOHN MEISEL (586) 574-6560 WARREN, MICHIGAN 48397-5000 EMAIL: MEISELJ@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			<b>CODE</b> W56HZV		<b>7. ADMINISTERED BY (If other than 6)</b> DCMA CHICAGO 1523 WEST CENTRAL ROAD BLDG 203 ARLINGTON HEIGHTS IL 60004-2451  SCD: C PAS: NONE ADP PT: HQ0339			<b>CODE</b> S1403A		<b>8. DELIVERY FOB</b>  <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)	
<b>9. CONTRACTOR</b>  C.E. NIEHOFF & CO. 2021 LEE STREET EVANSTON, IL. 60202  NAME AND ADDRESS  TYPE BUSINESS: Other Small Business Performing in U.S.			<b>CODE</b> 76761		<b>FACILITY</b>		<b>10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD)</b>  SEE SCHEDULE			<b>11. X IF BUSINESS IS</b> <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED	
<b>12. DISCOUNT TERMS</b>			<b>13. MAIL INVOICES TO THE ADDRESS IN BLOCK</b> See Block 15			<b>14. SHIP TO</b> SEE SCHEDULE			<b>15. PAYMENT WILL BE MADE BY</b> DFAS - COLUMBUS CENTER DFAS-CO/WEST ENTITLEMENT OPERATIONS P.O. BOX 182381 COLUMBUS, OH 43218-2381		
<b>16. TYPE OF ORDER</b>			<b>DELIVERY/ CALL</b> <input checked="" type="checkbox"/>		THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.						
<b>PURCHASE</b>			<input type="checkbox"/> Oral <input type="checkbox"/> Written		Quotation _____, Dated _____.						
					furnish the following on terms specified herein.						
					ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.						
<div style="display: flex; justify-content: space-between;"> <span>NAME OF CONTRACTOR</span> <span>SIGNATURE</span> <span>TYPED NAME AND TITLE</span> <span>DATE SIGNED (YYYYMMDD)</span> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:         </div>											
<b>17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE</b>  SEE SCHEDULE											
<b>18. ITEM NO.</b>		<b>19. SCHEDULE OF SUPPLIES/SERVICE</b>				<b>20. QUANTITY ORDERED/ ACCEPTED*</b>		<b>21. UNIT</b>	<b>22. UNIT PRICE</b>		<b>23. AMOUNT</b>
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  KIND OF CONTRACT: Supply Contracts and Priced Orders									
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					<b>24. UNITED STATES OF AMERICA</b> PAMELA L. GROZDON /SIGNED/ GROZDONP@TACOM.ARMY.MIL (586) 574-8552 BY: _____ CONTRACTING/ORDERING OFFICER					<b>25. TOTAL</b> \$31,191.00	
<b>27a. QUANTITY IN COLUMN 20 HAS BEEN</b> <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED											
<b>b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>c. DATE (YYYYMMDD)</b>		<b>d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>			
<b>e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE</b>						<b>28. SHIP. NO.</b>		<b>29. D.O. VOUCHER NO.</b>		<b>30. INITIALS</b>	
<b>f. TELEPHONE NUMBER</b>		<b>g. E-MAIL ADDRESS</b>				<input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		<b>32. PAID BY</b>		<b>33. AMOUNT VERIFIED CORRECT FOR</b>	
<b>36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.</b>						<b>31. PAYMENT</b>  <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL				<b>34. CHECK NUMBER</b>	
<b>a. DATE (YYYYMMDD)</b>		<b>b. SIGNATURE AND TITLE OF CERTIFYING OFFICER</b>								<b>35. BILL OF LADING NO.</b>	
<b>37. RECEIVED AT</b>		<b>38. RECEIVED BY (Print)</b>		<b>39. DATE RECEIVED (YYYYMMDD)</b>		<b>40. TOTAL CONTAINERS</b>		<b>41. S/R ACCOUNT NUMBER</b>		<b>42. S/R VOUCHER NO.</b>	

Name of Offeror or Contractor: C.E. NIEHOFF & CO.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT																								
	SUPPLIES OR SERVICES AND PRICES/COSTS																												
0011	NSN: 6110-01-420-1229 FSCM: 76761 PART NR: N3030 SECURITY CLASS: Unclassified																												
0011AA	<u>PRODUCTION QUANTITY</u>  NOUN: REGULATOR ASSEMBLY, PRON: EH44L658EH    PRON AMD: 01    ACRN: AA AMS CD: 070011  <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: SEE PACKAGING REQUIREMENTS SHEET UNIT PACK: 001 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial  <u>Inspection and Acceptance</u> INSPECTION: Origin        ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC                                SUPPL <table><tr><td><u>REL CD</u></td><td><u>MILSTRIP</u></td><td><u>ADDR</u></td><td><u>SIG CD</u></td><td><u>MARK FOR</u></td><td><u>TP CD</u></td></tr><tr><td>001</td><td>W56HZV4033T840</td><td>W45G19</td><td>J</td><td></td><td>2</td></tr></table> <table><tr><td><u>DEL REL CD</u></td><td><u>QUANTITY</u></td><td><u>DAYS AFTER AWARD</u></td></tr><tr><td>001</td><td>100</td><td>0180</td></tr><tr><td>002</td><td>100</td><td>0210</td></tr><tr><td>003</td><td>22</td><td>0240</td></tr></table> FOB POINT: Destination  SHIP TO: <u>FREIGHT ADDRESS</u> (W45G19)    XR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V TPF GATE 44 BLDG 184 TEXARKANA                                TX 75507-5000  <u>CONTRACT/DELIVERY ORDER NUMBER</u> W56HZV-04-D-0084/0001	<u>REL CD</u>	<u>MILSTRIP</u>	<u>ADDR</u>	<u>SIG CD</u>	<u>MARK FOR</u>	<u>TP CD</u>	001	W56HZV4033T840	W45G19	J		2	<u>DEL REL CD</u>	<u>QUANTITY</u>	<u>DAYS AFTER AWARD</u>	001	100	0180	002	100	0210	003	22	0240	222	AY	\$ 140.50000	\$ 31,191.00
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**CONTINUATION SHEET****Reference No. of Document Being Continued**

Page 3 of 3

**PIIN/SIIN** W56HZV-04-D-0084/0001

**MOD/AMD**

**Name of Offeror or Contractor:** C.E. NIEHOFF & CO.

## CONTRACT ADMINISTRATION DATA

LINE	PRON/ AMS CD/	OBLG	ORDER	ACCOUNTING	OBLIGATED	
ITEM	MIPR	ACRN STAT	ACCOUNTING CLASSIFICATION	NUMBER	STATION	AMOUNT
0011AA	EH44L658EH	AA 2 97	X4930AC6D 6D	26FB S20113	W56HZV \$	31,191.00
	070011					
					TOTAL \$	31,191.00

SERVICE						ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>TOTAL BY ACRN</u>	<u>ACCOUNTING CLASSIFICATION</u>				<u>STATION</u>	<u>AMOUNT</u>
Army	AA	97	X4930AC6D	6D	26FB S20113	W56HZV	\$ 31,191.00
						TOTAL	\$ 31,191.00